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Bib Data Sheet

CONFIRMATION NO. 5257

<b>SERIAL NUMBER</b> 09/973,067	<b>FILING DATE</b> 10/10/2001 <b>RULE</b>	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2614	<b>ATTORNEY DOCKET NO.</b> 12164
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF 09/920,723 08/03/2001  
AND A CIP OF 09/920,615 08/03/2001 *Take 25/147*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 10/30/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 10	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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**TITLE**  
Video and digital multimedia aggregator content coding and formatting

<b>FILING FEE RECEIVED</b> 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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